

<p>CDL-1</p> <p style="text-align: center;">FACE SHEET FOR FILING DOCUMENTS WITH THE LEGISLATIVE REFERENCE BUREAU</p> <p style="text-align: center;">(Pursuant to Commonwealth Documents Law)</p>	<p>RECEIVED LEGISLATIVE REFERENCE BUREAU</p> <p>15 SEP 16 PM 2:09</p> <p>PA. CODE & BULLETIN</p> <p style="text-align: center;">DO NOT WRITE IN THIS SPACE</p>	
<p>Copy below is hereby approved as to form and legality. Attorney General</p> <p>By _____ (Deputy Attorney General)</p> <p>_____ Date of Approval</p> <p>→ Check if applicable. Copy not approved. Objections attached.</p>	<p>Copy below is hereby certified to be a true and correct copy of a document issued, prescribed or promulgated by:</p> <p style="text-align: center;">Insurance Department</p> <p style="text-align: center;">_____ (AGENCY)</p> <p>DOCUMENT/FISCAL NOTE NO. _____</p> <p>DATE OF ADOPTION: _____</p> <p>BY: _____</p> <p style="text-align: center;">Teresa D. Miller Insurance Commissioner</p> <p>TITLE: _____ (EXECUTIVE OFFICER, CHAIRMAN OR SECRETARY)</p>	<p>Copy below is hereby approved as to form and legality. Executive or Independent Agencies</p> <p>BY: _____</p> <p>_____ DATE OF APPROVAL</p> <p style="text-align: center;">(DEPUTY GENERAL COUNSEL) (CHIEF COUNSEL, INDEPENDENT AGENCY) (STRIKE INAPPLICABLE TITLE)</p> <p>→ Check if applicable. No Attorney General approval or objection within 30 days after submission.</p>

Application for Designation as a Certified Reinsurer

Münchener Rückversicherungs-Gesellschaft Aktiengesellschaft in München (Munich Re) has applied for designation as a certified reinsurer in this Commonwealth. The application was received on August 31, 2015, and was made under section 319.1(a) of The Insurance Company Law of 1921 (40 P. S. § 442.1(a)) and 31 Pa. Code § 161.3a(c) (relating to requirements for certified reinsurers).

Persons who wish to comment on the application are invited to submit a written statement to the Insurance Department (Department) within 30 days from the date of this issue of the *Pennsylvania Bulletin*. Each written statement must include name, address and telephone number of the interested party; identification of the application to which the statement is addressed; and a concise statement with sufficient detail and relevant facts to inform the Department of the exact basis of the statement. Written statements should be directed to Kimberly A. Rankin, Director, Company Licensing and Financial Analysis, Insurance Department, 1345 Strawberry Square, Harrisburg, PA 17120, by fax to (717) 787-8557 or by e-mail to krankin@pa.gov.

TERESA D. MILLER,
Insurance Commissioner